

Application Data Sheet

Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD disks::	
Number of Copies of CDs::	
Sequence Submission?::	None
Computer Readable Form (CRF)::	No
Number of copies of CRF::	0
Title::	PROJECTOR WITH TRANSVERSE LIGHT SOURCE FOR AUTOMOTIVE VEHICLE
Attorney Docket Number::	0589-1001
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	2
Small Entity?::	No
Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Gov't Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: NORBERT
Middle Name::
Family Name:: BRUN
City of Residence:: GUERMANTES
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 7 ALLEE JEHAN DE BRIE

City of Mailing Address:: GUERMANTES
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-77600

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: JEAN-LUC
Middle Name::
Family Name:: MEYRENAUD
City of Residence:: LIVRY-GARGAN
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 14 ALLEE DES BOSQUETS

City of Mailing Address:: LIVRY-GARGAN
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-93190

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: KAMISLAV
Middle Name::
Family Name:: FADEL
City of Residence:: PANTIN
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 10 RUE GAMBETTA

City of Mailing Address:: PANTIN
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE
Postal or Zip Code of Mailing Address:: F-93500

Applicant Authority Type:: Inventor
Primary Citizenship Country:: FRANCE
Status:: Full Capacity
Given Name:: XAVIER
Middle Name::
Family Name:: HELME-GUIZON
City of Residence:: ASNIERES S/SEINE
State or Province of
Residence::
Country of Residence:: FRANCE
Street of Mailing Address:: 15 RUE ALBERT 1

City of Mailing Address:: ASNIERES S/SEINE
State or Province of Mailing Address::
Country of Mailing Address:: FRANCE

Postal or Zip Code of Mailing Address:: F-92600

Correspondence Information

Correspondence Customer 000466

Number::

Representative Information

Representative Customer	000466
Number::	

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
FRANCE	02 16607	12/24/02	Yes

Assignment Information

Assignee Name::

Street of Mailing Address::

City of Mailing Address::

State or Province of Mailing Address::

Country of Mailing Address::

Postal or Zip Code of Mailing Address::